

A monthly features service about science, technology, and development

(Approx. 700 words)

IDRC -F267e

INDIAN VILLAGERS TEACH PLANNERS SOME IMPORTANT LESSONS

by Andrew Williams

Not everyone agrees with the priorities of the United Nations Drinking Water Supply and Sanitation Decade. At least not the people of Vellakal and Guruvarajapalayam, two villages in Southern India.

A recent study by Earthscan, a British institute for environment and development, examined the water, sanitation and health problems of two surprisingly different villages in the dry belt in the state of Tamil Nadu. The study revealed that some basic assumptions made by global planners about sanitation and water are simply not in tune with the realities of village life.

Though only 50 kilometres separate them, and they have similar languages and customs, as well as similar health problems, differences between the villages were major and the researchers came up with unexpected findings.

Guruvarajapalayam is the larger village with a population of about 4000. Perhaps 400-500 years old, the town lies on a narrow strip between a road and a river. It has several communal water points and good access to medical care.

Vellakal, on the other hand, was founded only a few decades ago. Its population of 800, except for a small cluster of 25 households, is scattered throughout the surrounding fields. There is only one communal source of water and poor access to medical care.

The people of Guruvarajapalayam are better educated and more prosperous than those of Vellakal. And since they have more taps providing safe

water, they should be healthier, according to the conventional wisdom of the decade. The more taps, the higher the health standards.

The reverse is true. The people of Vellakal are noticeably healthier. Much to their surprise, the Earthscan researchers found a number of factors indicating that good health is not solely the result of the availability of clean water. Guruvarajapalayam was congested and dirty, whereas Vellakal was spread out and cleaner.

Despite being the poorer village, Vellakal offered better nutrition and a more equitable sharing of water. All the villagers, including the Harijans, were healthier. Guruvarajapalayam, being older, was more class conscious. As a result, the lower caste Harijan villagers were the first to suffer from the effects of drought.

The report called into question a number of other assumptions made about the importance of clean water and hygiene to the well-being of Third World people. Many planners believe that the building of latrines, for example, is a cost-effective method of eliminating excreta-related disease. The villagers made it clear that convenient latrines were not their most pressing priority. The researchers suggested that providing shoes and soap would be a less costly health measure.

Increasing the number of taps is not necessarily the solution to health problems planners might think it is. Although Guruvarajapalayam has more taps, and consequently more available water, the water comes from an open well and is untreated. Both villages suffer from the same diseases, but these seem more frequent in Guruvarajapalayam and infant mortality is astoundingly high, reports Earthscan. One problem is the crowded conditions that make infection easier.

Vellakal villagers have two main sources of water that are relatively safe

-- a handpump that serves the 25 families in the hamlet, and tubewells in the fields to serve the farming families. In addition, even the poorest villagers in Vellakal eat a more balanced diet than some of the better-off families in the neighbouring town.

Whereas rice is the staple of Guruvarajalayam, the people of Vellakal have vegetables, cereals, sugar cane, and groundnuts as a regular part of their diet. The link between nutrition and health is readily apparent in the two villages, says the Earthscan report.

The villagers' perceptions of their basic human needs complement the conclusions reached by the Earthscan researchers about health and sanitation. Having adequate food and shelter is fundamental for them. Health and sanitation are considered near luxuries. This is in part due to the villagers' reluctance to consider clear, fresh water the source of gastrointestinal diseases.

The Earthscan report concluded that while latrines would remove feces from the streets where flies transmit diseases, personal hygiene is equally important. In Vellakal, the availability of fields does not create the sanitation problem that lack of latrines does in Guruvarajapalayam. Providing cheap soap to eliminate the transfer of contamination from feces to water, and sandals to eliminate hook worms, would be a major step in improving the health of the villagers.

Also stressed in the report was the surprising differences between two closely located villages. The Earthscan study not only emphasized that isolating water and sanitation problems from other aspects of village life is an artificial and counterproductive policy, it also pointed out that it is impossible to impose an externally determined plan on all villages and expect it to work. There are just too many local differences to take into account.